GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

STARRED QUESTION NO:81
ANSWERED ON:06.03.2002
DEATH DUE TO POOR HEALTH CARE
SUNDER LAL TIWARI

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Government are aware that 24 lakhs children die every year in the country due to poor health care facilities as reported in the `Dainik Jagran` dated January 11, 2002;

(b) if so, the details thereof;

(c) the reaction of the Government thereto; and

(d) the steps taken by the Government to save the children from untimely death for want of health care?

Answer

MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR)

(a)to(d):A statement is laid on the table of the Lok Sabha.

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 81 FOR 6.3.2002

Government are aware of the report pertaining to deaths of children published in the `Dainik Jagran` of January11, 2002. The newspaper report gives a brief account of the status of mortality in children contained in the UNICEF document `The State of the World`s Children, 2001.`

As per the prevalent child (0-4) mortality rate (22.5 per thousand - SRS 1998), it is estimated that approximately 24 lakh children in the age group 0-4 years die every year. The major medical causes of deaths in this age include pre-mature birth, acute respiratory infections, diarrhoeal diseases and vaccine preventable diseases. High prevalence of low birth weight babies and malnutrition contribute to the mortality in this age group. Factors impacting social development, including female literacy, early age at marriage of girls leading to pregnancy in young women, short birth intervals, status of women, per capita income and poor health seeking behaviour contribute to child mortality.

The child (0-4) mortality rate has declined from 26.3 per thousand in 1990 to 22.5 in 1998. As per the Sample Registration System-1998, the child mortality rate ranges from 3.6 per thousand in Kerala to 32.6 in Madhya Pradesh. The child mortality rates for the major States are given in the Annexure.

Under the Reproductive and Child Health Programme, immunization, control of deaths due to acute respiratory infections and diarrhoea, provision of essential newborn care and promotion of exclusive breastfeeding and appropriate complementary feeding are being implemented. The Integrated Child Development Scheme is being implemented to provide supplementary nutrition to young children and pregnant and lactating mothers. To prevent micronutrient deficiencies of Vitamin A and Iron, prophylactic programmes are under implementation.

Several schemes have been launched for improving outreach services in the remote and difficult areas to further reduce infant and child mortality. These, inter-alia, include organization of RCH Camps, Dai Training Programme, Scheme for Strengthening Reproductive and Child Health Services, Immunization Strengthening Project, Border District Cluster Strategy and operationalisation of Newborn Care.

ANNEXURE

CHILD (0-4) MORTALITY RATE

Andhra Pradesh	18.1
Assam	27.5
Bihar	22.9
Gujarat	19.6
Haryana	22.4
Himachal Pradesh	16.7
Karanataka	16.7
Kerala	3.6
Madhya Pradesh	32.6
Maharashtra	12.7
Orissa	29.0
Punjab	16.8
Rajasthan	27.7
Tamil Nadu	13.0
Uttar Pradesh	29.0
West Bengal	15.0
India	22.5

Source: Sample Registration Sytem-1998